GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

STARRED QUESTION NO:234
ANSWERED ON:14.03.2007
HIGH INCIDENCE OF ANAEMIA
Kurup Adv. Suresh;Patil Shri Shriniwas Dadasaheb

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the prevalence of anaemia is very high in pregnant and lactating women, pre-school children, and adolescent girls in the country;

(b) if so, the number of women and children affected by anaemia, State-wise :

(c) the reasons alongwith the measures taken or proposed to be taken by the Government to detect and prevent anaemia;

(d) whether the Government has taken any steps to furthering the availability, access, affordability and utilization of iron and iodine fortified salt (double fortified salt) and other micronutrients, as a means to combat anaemia, to the poorer segments of the population;

(e) if so, the details in this regard;

(f) whether a special programme for detecting anaemia on the lines of polio immunization would be undertaken throughout the country; and

(g) if so, the details there of ?

Answer

THE MINISTER OF THE STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS)

(a)to(g) : A statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 234 FOR 14TH MARCH, 2007

(a)&(b): As per the National Family Health Survey (NFHS-III, 2005-06), 57.8% pregnant women (15-49 yrs), 56.1% ever married women (15-49 yrs) and 79.1% children in the age group 6-35 months are anemic. State-wise prevalence of anemia is at annexure I.

According to survey conducted by National Nutrition Monitoring Bureau (NNMB) of ICMR in 2002 in 8 states on micronutrient deficiency, the prevalence of anemia in the age group 12-17 year adolescent girls ranges between 69-70%.

(c) Anemia is a multifaceted problem. The important reasons for widespread anemia are inadequate intake and absorption of iron from cereal based diet, inadequate consumption of green leafy vegetables and citrus fruits, frequent pregnancies with shorter intervals, high prevalence of infections and infestations, faulty feeding practices and lack of dietary diversification. Apart from aforesaid factors, illiteracy, poverty and general economic and social development have a bearing on the incidence of anemia among people of our country.

Government of India has launched the National Rural Health Mission (NRHM) in order to improve the availability and access to health care. The interventions under NRHM include RCH-II programme wherein iron and folic acid tablets are provided to all pregnant women who come for antenatal checkup.

Several other measures taken by the Government to improve the nutritional status of the people including anemia are at Annexure II

(d) & (e) A Technical Committee constituted by Ministry of Health & FW under the chairpersonship of Secretary, Department of Biotechnology and Director General, ICMR, has recommended voluntary use of Double Fortified salt (DFS). DFS is being used as a Pilot programme in few states of the country. However, presently no data are available on its impact. Government of Chattisgargh has been distributing DFS through the ICDS programme.

To improve the level of anemia, iron and folic acid tablets are distributed to pregnant women and preschool children under the Reproductive and Child Health Programme (RCH-II).

The Government has a National Iodine Deficiency Disorder Control Programme (NIDDCP), being implemented since 1962. Under this programme, intensive awareness generation activities are ongoing through various print as well as electronic media to promote the consumption of iodated salt by the population. In addition, the programme also addresses monitoring of the quality of iodated salt

through States and UTs' Health Directorates.

Under the National Rural Health Mission, the states have been advised to organise monthly health and nutrition days where anemia prevention measures are also discussed.

(f)&(g) There is no special programme for detecting anemia on lines of polio immunization. However, there is a provision for hemoglobin estimation in Government medical college hospitals, district hospitals, First Referral Units, Community Health Centres (CHCs) etc where ante-natal check ups are done.